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PENRITH RURAL DISTRICT COUNCIL

—

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

and

SANITARY SURVEYER

FOR THE YEAR

1954



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MANSION HOUSE,
PENRITH.

July, 1955.

*To the Chairman and Members of the
Penrith Rural District Council.*

Mr. Chairman, Miss MacInnes and Gentlemen,

I herewith submit my Annual Report on the health of the district for the year 1954.

The population, as estimated by the Registrar-General, at 11,490, shows an increase of 40 over the previous year and is a little higher than the average of the past ten years.

The Birth rate of 14.9 (crude rate) shows a fall over the rate of 16.4 in 1952. The corrected rate of 15.5 compares with a National rate of 15.2. It will be noted that the Birth rate, even after correction, has been falling over the past few years.

The Crude Death rate of 11.8 compares with a crude rate of 10.1 in 1953 and thus shows a distinct upward trend. The corrected rate of 10.8 compares with the England and Wales figure of 11.3 and a rate of 11.9 for the Administrative County of Cumberland.

The Infantile Death rate at 17.4 per 1000 live births shows a very decided improvement over the 1953 rate of 31.9. The rates for England and Wales and the County of Cumberland are 25.5 and 27.6 respectively.

It must be remembered that Vital Statistics based on small populations show considerable fluctuation from year to year and especially so for Infantile death rates.

The incidence of infectious diseases was not unduly high, Measles forming the bulk of notifications. There was no case of Poliomyelitis and for the tenth successive year no case of Diphtheria.

Details of Housing progress, water supplies, sewerage schemes, etc. are given by the Surveyor within the body of this report.

It is regrettable to report however, that despite the very great need for improving existing sewerage disposal plants and the installation of new plants no active progress in this direction was made during the year.

For example the plant at Lazonby is grossly overloaded and antiquated, and those at Skelton, Low Hesket and Kirkoswald are quite inadequate to deal with the present volume of sewage.

High Hesket and some smaller hamlets in the area have no public sewers or disposal plants at all.

This state of affairs is most unsatisfactory and, while admitting that such schemes are relatively costly, it is time that the Central Government gave more consideration and financial help towards the completion of these necessary improvements.

My grateful thanks are due to members of the Council for their help and support during the past year.

I would also thank the staffs of the various departments of the Council and in particular members of the Health staff for their loyalty and co-operation.

I am, Miss MacInnes and Gentlemen,

Your obedient Servant,

K. J. THOMSON.

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area of the District (in acres)	..	..	..	181,531
Number of Inhabited Houses	..	..	..	3,555
Rateable Value	..	..	..	£52,710
Sum represented by a Penny Rate	..			£212 6s. 11d.
Registrar General's estimate of the population..				11,490

Population.

The Registrar General's estimate of the population at 11,490 shows an increase of 40 over the previous year. As pointed out in 1953 population figures have varied very little over the past 10 years.

Agriculture and Dairy farming continue to be the staple industries of the district and to my knowledge no new industry has been introduced during the year.

There has been no unemployment problem.

VITAL STATISTICS.

Births	Males	Females	Total
(a) Live Births :—			
Legitimate ..	82	81	163
Illegitimate ..	4	5	9
	—	—	—
	86	86	172
	—	—	—
Birth Rate per 1,000 of population ..			14.9
Birth Rate corrected by comparability factor			15.5
(b) Still Births :—			
Legitimate	3	2	5
Illegitimate ..	-	-	-
			—
			5
			—
Rate per 1,000 total births (live and still)			28.2

Deaths	Males	Females	Total
Deaths, all ages ..	76	60	136
Death Rate per 1,000 of population			11.8
Death Rate corrected by comparability factor			10.8
Deaths from Puerperal Causes			Nil
Maternal Mortality Rate			Nil
Death Rate of Infants under one year :—			
All Infants per 1,000 live births			17.4
There were no deaths of Illegitimate Infants.			

Deaths from :—

Cancer	17
Measles	Nil
Whooping Cough	Nil
Diarrhoea (under two years of age)	Nil

Table showing the Vital Statistics for England and Wales and certain groups in the County of Cumberland for 1954:-

	Birth Rate	Crude Death Rate	Infantile Mortality Rate
England and Wales	15.2	11.3	25.5
Administrative County of Cumberland ..	16.4	11.9	27.6
Urban Districts of Cumberland (including Boroughs of Workington and Whitehaven)	17.5	11.4	24.9
Rural Districts of Cumberland	15.7	12.1	29.6
Rural District of Penrith (crude rate) ..	14.9	11.8	17.4
Corrected by Comparability factor ..	15.5	10.8	17.4

Infantile Mortality.

There were 3 deaths of infants under one year of age giving an Infantile Mortality Rate of 17.4 per 1,000 live births. This compares with a rate of 31.9 in 1953 and is well below the National rate of 25.5.

It must be borne in mind, however, that Infantile Mortality rates based on such small numbers can be very misleading, e.g. two additional infant deaths would raise the Infantile death rate to 29 per 1,000 live births.

The details are as follows :—

1. Boy born and died in Hospital of Broncho-pneumonia, aged 4 days.
2. Girl died at home, aged 2 months—Homicide death.
3. Girl born and died in Hospital within 3 minutes of birth, death being due to birth injury.

Maternal Mortality.

No Puerperal or Maternal death was recorded during the year, this being the eleventh successive year without such a death.

Cancer Mortality.

There were 17 deaths from Cancer giving a rate of 1.39 per 1,000 of the population and equal to 12.5% of all deaths. These rates are practically the same as for last year and are below the National figures. Indeed the Cancer death rates for the Penrith Rural area have remained much the same for the past few years, while the rates in England and Wales have tended to rise. The average age at death of all Cancer cases was 66.5 years against 72.5 years in 1953. This considerable difference in age was due to deaths of patients aged 28 years, 46 years and two at 49 years.

The average age for Male cancer deaths was 68 years while those for Females was 65 years.

Location of Disease.				Males	Females
Stomach	..	..	..	3	3
Pancreas	..	..	..	1	-
Colon	..	..	..	3	-
Breast	..	..	..	-	1
Uterus	..	..	..	-	3
Prostate	..	..	..	1	-
Testes (Teratoma)	..	..	..	1	-
Kidney	..	..	..	-	1
Total				9	8

Deaths from all causes.

The total number of deaths recorded during the year was 136 compared with 116 in 1953 giving a Crude Death Rate of 11.8. This compares with a rate of 10.1 in 1953 and the National rate for England and Wales in 1954 of 11.3 per 1,000 of the population.

The Crude Death and Birth rates of an area are corrected by a Comparability Factor which is worked out by the Registrar General. By this means age and sex distribution of the population are adjusted so that the Comparability Factor applied to the Crude rates allow of more accurate comparisons to be made between one area and another.

While therefore the Crude Death Rate for Penrith Rural area in 1954 was 11.8 the corrected rate is 10.8 and it is this latter figure which should be considered when comparing with the National rate of 11.3 or with corrected rates in other areas.

It will be noted however that the Penrith Rural Death rate for 1954 shows a distinct rise over the 10.1 rate in 1953.

Diseases of the Heart and Circulatory System as usual accounted for the greatest number of deaths—a total of 60—representing 44% of all deaths. These figures show an upward swing as compared with 1953 when the corresponding figures were 47 and 40.5%.

Vascular lesions of the Nervous System accounted for 30 deaths equal to 22% of all deaths and this rate is practically the same as for 1953.

Deaths from Cancer, as already indicated, totalled 17 representing 12.5% of all deaths being a fraction less than in 1953.

Only 6 deaths were recorded as due to diseases of the Respiratory System equal to 4.4% of all deaths. This rate was the same as in 1953.

Deaths from Motor accidents totalled 6 while deaths from all other accidents were 3—more or less the same as in 1953.

Causes of Death as given by the Registrar-General, 1954.

Males. Females. Total.

1.	Tuberculosis (Respiratory)	..	..	..	-	-	-
2.	Tuberculosis (Other)	..	..	..	-	-	-
3.	Syphilitic Disease	..	..	..	-	-	-
4.	Diphtheria	..	..	..	-	-	-
5.	Whooping Cough	..	..	..	-	-	-
6.	Meningococcal Infections	..	..	..	-	-	-
7.	Acute Poliomyelitis	..	..	..	-	-	-
8.	Measles	..	..	..	-	-	-
9.	Other Infective and Parasitic Diseases			..	-	-	-	
10.	Malignant Neoplasm—Stomach	..	..		3	3	6	
11.	Malignant Neoplasm—Lung, Bronchus			..	-	-	-	
12.	Malignant Neoplasm—Breast	..	..		-	1	1	
13.	Malignant Neoplasm—Uterus	..	..		-	3	3	
14.	Other Malignant and Lymphatic Neoplasms				6	1	7	
15.	Leukaemia, Aleukaemia	..	..	..	-	-	-
16.	Diabetes	..	..	..	-	1	1	
17.	Vascular Lesions of Nervous System			..	13	17	30	
18.	Coronary Disease—Angina	..	..	..	15	5	20	
19.	Hypertension with Heart Disease	..	..		1	2	3	
20.	Other Heart Diseases	..	..	..	18	13	31	
21.	Other Circulatory Diseases	..	..	..	4	2	6	
22.	Influenza	..	..	..	-	-	-
23.	Pneumonia	..	..	..	2	-	2	
24.	Bronchitis	..	..	..	4	-	4	
25.	Other Diseases of Respiratory System			..	-	-	-	
26.	Ulcer of Stomach and Duodenum	..	..		1	-	1	
27.	Gastritis, Enteritis and Diarrhoea	..	..		-	1	1	
28.	Nephritis and Nephrosis	..	..	..	-	-	-
29.	Hyperplasia of Prostate	..	..	..	-	-	-
30.	Pregnancy, Childbirth and Abortion	..	..		-	-	-
31.	Congenital Malformations	..	..	..	1	-	1	
32.	Other defined and Ill-defined Diseases	..		..	2	5	7	
33.	Motor Vehicle Accidents	..	..	..	4	2	6	
34.	All Other Accidents	..	..	..	1	2	3	
35.	Suicide	..	..	..	1	-	1	
36.	Homicide and Operations of War	..	..	..	-	2	2	
	All Causes	..	..	..	76	60	136	

Age Group at Death of all Cases, 1954.

Age Group	Under 1 year	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 and over	Total
Males	1	1	-	-	1	1	2	2	3	11	16	38	76
Females	2	1	-	-	-	-	-	-	3	1	16	37	60
Total	3	2	-	-	1	1	2	2	6	12	32	75	136

NOTE :—78% of total deaths occurred in age groups of 65 years and over.

55% of total deaths occurred in age groups of 75 years and over.

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

(i) Public Health Department Staff.

K. J. Thomson, M.B., Ch.B., D.P.H., L.M., Part time Medical Officer of Health.

J. A. Sedgwick, A.R.San.I., M.S.I.A., Surveyor and Chief Sanitary Inspector.

N. H. Peel, A.R.San.I., M.S.I.A., Assistant Sanitary Inspector. Resigned 31/12/54.

E. A. Burne, M.Inst.R.A., Architect and Housing Officer.

D. Wood, Assistant in Health and Housing Department.

Miss I. Coulston, Clerk in Public Health Department.

(ii) Laboratory Facilities.

These are provided by the Public Health Laboratory Service at the Cumberland Infirmary under the direction of Dr. J. Steven Faulds. I have again to thank Dr. Faulds and his staff for their help and advice during the year.

(iii) Hospital and Ambulance Services.

There was no change in the arrangements for these services during the year. The Ambulance service, organised by the County Council, has functioned very well.

(iv) Nursing in the Home.

The County Council being the responsible Health Authority provide District Nurses, Midwives, Health Visitors and Home Helps. In a Rural Area it has been found better to combine these duties so far as nursing is concerned.

For the Penrith Rural area therefore there are 8 District Nurse/Midwife/Health Visitors each working in their own area. In addition 6 Home Helps are on the Register—a number perhaps on the small side. It is however difficult to find women suitable and willing to do this type of work in a scattered district.

Notification of Infectious Diseases—1954 in Age Groups.

Diseases.		-1	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-	55-	65-	T	AH	D
Measles	2	9	9	18	14	67	14	2	1	1	-	-	137	-	-
Whooping Cough	3	3	2	3	3	12	1	-	-	-	-	-	27	-	-
Scarlet Fever	-	-	1	1	3	3	2	-	-	-	-	-	10	-	-
Primary or Influenzal Pneumonia			1	-	1	-	-	-	-	2	1	-	-	3	8	1	2
Erysipelas	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-
TOTALS	6	12	13	22	20	82	17	2	3	1	1	3	183	1	2

Key :—

- T - Total.
- AH - Admitted to Isolation Hospital.
- D - Deaths.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE.

The total number of notifications of infectious diseases received, showed a fall over the previous year—183 against 256. It will be noted that measles cases form the bulk of the notifications and this has been so for many years.

There were 2 deaths from notifiable disease, both cases dying of Pneumonia. The only case admitted to Hospital was a Pneumonia patient.

Measles.

There was no real epidemic in the sense of an outbreak limited to a certain period of the year, but rather cases occurred throughout the year.

The first cases were notified in the middle of March and continued up to the end of April. No cases occurred during May and June but from July until the end of the year, the area was never entirely free of measles.

A total of 137 cases was notified and these were scattered throughout the whole district. In 1953, there were 207 measles notifications.

Scarlet Fever.

Ten cases were notified, against seventeen in 1953. All were children, 5 being of school age and 5 in *pre-school* group.

No case was severe but two took 6—8 weeks to become bacteriologically clear despite anti-biotic treatment. The 10 cases all occurred in the South and West part of the Rural District and the majority were notified during the autumn and winter months.

Whooping Cough.

Twenty seven cases were notified compared with 10 in 1953 and 52 in 1952. Like the Scarlet Fever cases, all were children, the distribution of the age groups being almost the same. Strangely enough, the majority of cases occurred in the same area as the scarlet fever cases.

Pneumonia.

There were only eight cases of notifiable pneumonia with two deaths, compared with seventeen cases and four deaths in 1953. Ages of patients varied from under one year to 79 years.

Erysipelas.

One case of this condition was notified.

Diphtheria.

It is again pleasing to report that the district has remained clear of this disease—the tenth successive year of immunity.

As pointed out in previous reports, this freedom from Diphtheria is entirely due to the preventive work of the Immunisation Campaign commenced in 1940.

During 1954 the following number of children were immunised in the Penrith Rural District :—

Primary inoculations—

(a) Children up to 5 years	..	..	149
(b) Children 5—14 years	..	..	12
Re-immunisations or Booster Doses	..		490

These figures are more satisfactory and show a very considerable improvement over 1952 and 1953. It must be remembered however, that in 1953 various factors (explained in the Report of that year) interfered with the normal Immunisation programme.

Since 1944, records have been kept of corrected diagnosis following notification and the following figures show how effective immunisation has been.

Year.	ENGLAND & WALES.		PENRITH RURAL DISTRICT.	
	Notifications.	Deaths.	Notifications.	Deaths.
1944	23,199	934	4	-
1945	18,596	722	-	-
1946	11,986	472	-	-
1947	5,609	244	-	-
1948	3,575	156	-	-
1949	1,890	84	-	-
1950	962	49	-	-
1951	664	33	-	-
1952	376	32	-	-
1953	266	23	-	-
1954	182	9	-	-

The figures for 1954 are provisional.

Smallpox.

No case or known contact of smallpox occurred in the area.

Poliomyelitis.

No case or suspected case was notified during the year, as opposed to two in 1953. Indeed the whole County of Cumberland remained remarkably free of this disease during 1954.

TUBERCULOSIS.

The following table gives particulars of new cases added to the Register during the year.

AGE.	NEW CASES.				DEATHS.			
	Respiratory.		Non-		Respiratory.		Non-	
			M.	F.			M.	F.
To one year ..	-	-	-	-	-	-	-	-
1—4 years ..	-	-	-	-	-	-	-	-
5—14 years ..	1	-	-	-	-	-	-	-
15—24 years ..	1	2	-	-	-	-	-	-
25—34 years ..	1	2	-	-	-	-	-	-
35—44 years ..	-	1	-	-	-	-	-	-
45—54 years ..	-	1	-	1	-	-	-	-
55—64 years ..	-	-	-	-	-	-	-	-
65 and upwards	1	-	-	1	-	-	-	-
TOTALS ..	4	6	-	2	-	-	-	-

In the above total of 12 cases 11 refer to cases notified for the first time, while the 12th was an inward transfer case, i.e. a case previously notified in another district.

Three of the cases were discovered through visits to the Mass Radiography Unit while operating in the area. For the second year in succession, there was no recorded death from any form of Tuberculosis.

The total number of cases on the Register at 31st December, 1954 was 58, exactly the same as in the previous year. During 1954, 12 cases were transferred out of the area, thus balancing the 12 new cases.

Tuberculosis Register at 31st December, 1954.

Males.		Females.		Total
Pulmonary.	Non-Pulmonary.	Pulmonary.	Non-Pulmonary	
22	4	24	8	58

The Mobile Miniature Mass Radiography Unit paid its annual visit to Penrith during February 1954 and also held sessions at Lazonby and Langwathby. A total of 2006 were then X-rayed, of which number 361 attended the Lazonby and Langwathby sessions. Many Rural District people undoubtedly attended the Penrith sessions but it was not possible to obtain separate figures. As already mentioned, three active cases were thus discovered.

SANITARY CIRCUMSTANCES OF THE AREA.

I am obliged to Mr. J. A. Sedgwick, Surveyor and Sanitary Inspector for the following report :—

Sir,

I have pleasure in presenting my Annual Report for 1954 as follows.

Water Supplies.

The sources of water in the Penrith Rural Area are exactly the same as in previous years, comprising three major sources, Aira Beck, Bullfell (Mungrisdale) and Clint (Hesket), together with thirteen small individual supplies with comparatively limited areas of supply. Of these supplies only the Aira Beck supply receives treatment of any kind. This is a supply maintaining an average daily consumption of more than half the total demand in the Penrith Rural Area, and full filtration and chlorination treatment is provided at the Dowthwaite Head Filter Works.

Samples of water for chemical and bacteriological examination from all these sources are taken regularly and sent to the Cumberland Pathological Laboratory at Carlisle. Generally the samples are perfectly satisfactory, although after spells of wet weather adverse bacteriological reports are received from some of the smaller village supplies, indicating slight animal pollution from stock grazing in the vicinity. Such pollution is temporary in duration and clears up rapidly.

The following table, divided into Parishes, gives the estimated particulars of the population, number of occupied dwellinghouses, and the number of such houses connected with the public service main.

Parish	Population	No of Houses	No of Houses Supplied		Population Supplied		Agricultural	
			(a) Direct	(b) Standpipe	(a) Direct	(b) Standpipe	Meters	Fixed
Ainstable ..	483	155	126	8	423	15	27	
Castle Sowerby ..	409	103	102	-	406	-	54	
Catterlen ..	225	96	96	-	225	-	16	
Culgaith ..	664	205	204	1	664	2	27	
Dacre ..	935	306	290	-	875	-	52	
Glassonby ..	320	100	91	1	296	2	24	
Gt. Salkeld ..	366	116	109	-	346	-	17	
Greystoke ..	505	165	160	-	475	-	23	
Hesket ..	2055	585	544	8	1950	25	131	
Hunsonby ..	368	132	131	1	368	1	21	
Hutton ..	306	97	92	-	290	-	22	
Kirkoswald ..	782	255	189	5	754	6	28	
Langwathby ..	572	184	176	2	542	7	21	
Lazonby ..	645	206	193	-	595	-	19	
Matterdale ..	581	184	82	-	272	-	21	
Mungrisdale ..	368	101	75	-	280	-	35	
Ousby ..	356	107	100	-	336	-	18	
Skelton ..	990	273	262	1	938	2	94	
Threlkeld ..	560	185	143	-	420	-	1	
Total ..	11490	3555	3165	27	10455	60	651	

From the foregoing statistics it will be seen that approximately 90% of the houses in the Penrith Rural Area are in receipt of a piped water supply from the Council's mains, only 363 houses out of a total of 3,555 occupied houses not being connected thereto. The majority of these houses are in isolated fell country where no Council main is available and they rely for their supplies on fell springs, the greater majority of which are reasonably satisfactory so far as pollution is concerned.

The average daily consumption throughout the year is in the region of 600,000 gallons per day for all purposes (including agricultural needs) or approximately 57 gallons per head per day.

Normally the amount of water available is sufficient to meet demands in all but those high-lying parts of the area where the twice daily peak demand for milk cooling purposes causes a certain inconvenient intermittency. Any prolonged spell of dry weather, or any undetected leakages caused by defective mains, makes the intermittency considerably worse until the defect can be located and remedied.

The major mains extension from High Larches Reservoir to Johnby, Greystoke, Blencowe and Lamonby is now well under way, and, at the end of the year approximately two-thirds of the work had been completed. This work is being carried out by direct labour under my personal supervision, and a considerable saving is being effected compared with estimated costs.

The supply causing the greatest anxiety is the Hesketh Supply, and, particularly, the supply to High Hesketh itself. This village is relatively high lying compared with the rest of the distribution area, and is supplied from Ruckcroft reservoir with a capacity of only 50,000 gallons. Ruckcroft reservoir is fed from Clint Springs, with a minimum dry weather yield of 37,000 gallons per day. The normal quantity of water required from Ruckcroft reservoir is some 60,000 gallons per day. Following frequent representations made by me to the Council, they have decided to carry out remedial works and have instructed their Consulting Engineers accordingly. It is proposed to augment the Hesketh supply :—

(a) by the abstraction of water from the Dale Springs, near Ainstable, and pump it nearly one mile to Ruckcroft reservoir ; and

(b) by enlarging Ruckcroft reservoir from 50,000 to 250,000 gallons.

So far as water for agricultural uses is concerned, great care is taken to ensure that no avoidable wastage takes place, and, to this end, some 650 farms now have their supplies through meter.

Sewerage.

The position at the time of making this report is substantially the same as it was twelve months ago. Several schemes have been submitted for the approval of the Ministry but in no case have the Council yet been able to satisfy the Minister completely, and amended schemes are constantly in the course of preparation. All this is very disappointing, particularly in view of the great urgency for satisfactory sewerage schemes in many villages, particularly High Hesket, Skirwith, and Skelton, to say nothing of the unsatisfactory conditions prevailing at Lazonby, Kirkoswald, Armathwaite, Motherby, and several other villages and hamlets.

Refuse Collection.

There has been no alteration in the method of refuse collection since last year. The Council operate a fortnightly collection throughout practically the whole of their large and well scattered area, using a C.K.3 Karrier Refuse Vehicle for this purpose, manned by a driver and two loaders. This vehicle has proved itself to be eminently satisfactory for this type of country. It is impossible for the Council to extend the area of their collections or to increase the frequency of the collection. The only manner in which this could be done would be by the complete duplication of the whole system which would not be practicable from an economic angle.

Modern methods of rodent control are practised successfully at all the Council's Refuse Tips.

Schools.

Inspections are periodically made of all schools in the area, particularly with regard to sanitary and washing conveniences. Generally speaking, the accommodation provided is maintained satisfactorily, although the absence of a sewerage scheme at High Hesket renders the use of pail closets necessary. I am happy to report that during the year a combined sewerage scheme for the Council's houses at Plumpton and the school there enabled the Education Authorities to instal a proper water-borne sewerage system and to abandon the use of pail closets.

Factories Act 1937.

All factories in the area are regularly inspected, and, where irregularities occur, remedial measures are insisted upon.

Food and Drugs Act, 1938.

All food shops in the area are kept under close supervision, and the attention of all handlers of food is called to the care required to maintain a proper standard of hygiene.

During the course of food inspection, the following items of food were condemned as being unfit for human consumption :—

- 1 tin cooked shoulder ham.
- 6 tins red cherries in syrup.
- 26 tins apricots.

Slaughterhouses.

In July the Council permitted the re-opening of seven slaughterhouses in their area, six of which are still in use. In all these cases, the butcher concerned does not have a shop in the rural area, but sells his meat from a van. As before the war, the quality of meat exposed for sale has been very high, and condemnations have been negligible, the only condemnations for tuberculosis being in respect of two pig

heads slightly affected. The opening of these slaughterhouses has been of the greatest value to the butchers concerned, all of whom are most anxious to co-operate with me in the production of meat in as hygienic conditions as possible, considering the limitations of the premises available. It has been most noticeable that the meat exposed for sale is handled much less before sale than when it had to be transported from the abattoir at Penrith or Carlisle to the butcher. Most of the slaughterhouses are below the standard required for a modern slaughterhouse but the method of killing and dressing of carcasses could not be greatly improved even if all modern slaughtering facilities were available. In any case I am very reluctant to ask the local butchers to spend a lot of money improving their premises when there is a possibility that in a year or two they may once again be compelled to slaughter at a central abattoir. If this should happen, I am satisfied that in this area, at least, there will be no improvement whatsoever in the quality of meat supplied, and quite possibly the reverse.

Meat Inspection is carried out at all slaughterhouses and I have found nothing but the closest co-operation between the butchers and myself in the carrying out of this work.

Disinfection and Disinfestation.

Following the notification of infectious diseases terminal disinfection is carried out where necessary. The incidence of infectious disease requiring such disinfection is very low in this area, nor has it been at all necessary to deal with any filthy or verminous premises, or bed bug infested houses during the year.

Ice Cream.

There is only one producer of ice cream in the area. His premises are regularly inspected and samples of his products taken to ensure complete satisfaction as to the quality and cleanliness of the ice cream. In addition samples of ice cream are taken at regular intervals from retailers in the area purveying proprietary brands of ice cream. Generally speaking no complaints can be made of the standard of ice cream sold.

New Council Houses.

The Council are continuing to make reasonable progress with their programme of providing houses for agricultural and other workers in their area, and since the end of the last war houses have been built by the Council on the undermentioned sites :—

Langwathby ..	12	Ainstable	4
Lazonby ..	8	Low Braithwaite ..	2
Culgaith	8	Pallet Hill	2
Hunsonby ..	14	Catterlen	6
Newbiggin ..	10	Skirwith	8
Stainton	16	Glassonby	4
Low Hesket ..	6	Renwick	4
Calthwaite ..	8	Auldby	2
Edenhall	4	Low Plains	4
Greystoke ..	22	Armathwaite ..	2
Great Salkeld ..	4	Mellguards	2
Howes	2	Aikbank	4
Ousby	4	Melmerby	4
Salkeld Dykes ..	4	Skelton	6
Blencowe ..	4	Threlkeld	18
Plumpton ..	22	Little Salkeld ..	16
Dacre	2	Gamblesby	4
Penruddock ..	2	Kirkland	2
		Kirkoswald	14
		Total ..	<u>250</u>

During the War 16 houses were erected by the Council as under :—

Thiefside ..	4	Highbankhill	4
Culgaith	4	Newton Reigny ..	2
		Low Hesket ..	2
		Total ..	<u>16</u>

Prior to the war the Council had erected houses in various parts of the area as under :—

Clickem	4	Hutton End	2
Catterlen	2	Kirkoswald	6
Culgaith	4	Langwathby	6
Dacre	2	Lazonby	8
Plumpton	3	Threlkeld	6
Stainton	6	Calthwaite	3
Southwaite	2	Low Hesket	4
Hunsonby	5		
		Total	63

In all the Council have now completed 329 houses and at the end of the year 36 houses were in various stages of erection.

In addition, since the war, 59 houses have been completed by private enterprise.

Housing Improvement Grants.

The Council are well aware of the fact that there are many sub-standard houses within their area, and many otherwise satisfactory houses lack amenities which are now considered to be essential even in remote localities. In order to improve this position, the Council are taking all steps necessary to bring to the notice of owners of such properties the benefits available under the 1949 Housing Act.

During the year a great deal of my time has been spent in advising prospective applicants of the conditions to be fulfilled before any grant could be made, and in all 25 schemes have been approved and work commenced. This work is continuing to grow as more owners become aware of the provisions of the Act. There is every hope therefore that an increasing number of properties in the Penrith Rural Area which would otherwise deteriorate to the stage when demolition would be necessary, will be saved and brought up to the proper standards.

SANITARY INSPECTIONS OF THE AREA.

Summary of Inspections Made.

Workshops	..	..	..	..	..	..	22
Petrol Stores	..	..	..	..	..	..	82
Carbide Stores	..	..	..	..	..	..	4
Works in progress	..	..	..	..	..	..	228
New Buildings	..	..	..	..	..	..	216
General Inspections	..	..	..	..	..	..	412
Inspections re complaints received			..	..	..	..	87
Inspections under Housing Acts	..	..	..	..	..	..	594
Inspections of Schools	..	..	..	..	..	..	36
Slaughterhouses	..	..	..	..	..	..	284

Works Carried Out.

Premises cleansed	..	..	..	..	..	..	Nil
Roofs repaired	..	..	..	..	..	..	14
New Spouting fixed	..	..	..	..	..	..	6
Air drains fixed	..	..	..	..	..	..	2
Floor relaid, etc.	..	..	..	..	..	..	18
Walls repaired	..	..	..	..	..	..	21
Scullery sinks trapped	..	..	..	..	..	..	8
Water closets constructed		..	..	..	..	..	31
Sewers and Drains extended		..	..	..	..	..	48
New Septic Tanks built	..	..	..	..	..	..	29
Water Supplies carried to houses			..	..	..	..	24
New Baths fixed	..	..	..	..	..	..	18
New Houses completed	..	..	..	..	..	..	57
Houses altered or repaired		..	..	..	..	..	14
New Windows fixed	..	..	..	..	..	..	84
New Ceilings put up or repaired	..		..	..	..	..	25
New Sinks fitted to houses	..	..	..	..	..	..	14
Obstructed Drains cleansed	..	..	..	..	..	..	34
Drains tested	..	..	..	..	..	..	84

Yours faithfully,

J. A. SEDGWICK.

Surveyor and Sanitary Inspector.

